

No. <b>W 85235</b>		<b>Due no later than Jul 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ROBERTSON QUALITY ASSURANCE PLLC CHERYL A ROBERTSON 227 MADISON ST W KIMBERLY ID 83341 USA		CHERYL A ROBERTSON 227 MADISON ST W KIMBERLY ID 83341	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	CHERYL A ROBERTSON	227 MADISON ST. W.	KIMBERLY	ID	USA 83341-8334
5. Organized Under the Laws of:  <b>ID W 85235</b>		6. Annual Report must be signed.* Signature: Cheryl Robertson Name (type or print): Cheryl Robertson Date: 08/11/2015 Title: Manager			
Processed 08/11/2015		* Electronically provided signatures are accepted as original signatures.			